

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE
14 MAY 30 PM 2:44
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Childers for Senate, Inc.

ADDRESS (number and street) PO Box 246

☐ Check if different than previously reported. (ACC)

Booneville MS 38829
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER 3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A) STATE DISTRICT
C00559997 MS

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☐ January 31 Year-End Report (YE)

(b) 12-Day PRE-Election Report for the:

- ☒ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on 06/03/2014 in the State of MS

(c) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on in the State of

☐ Termination Report (TER)

5. Covering Period 04/01/2014 through 05/14/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Marylin Jones

Signature of Treasurer

Marylin Jones

Date 5-22-14

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the Penalties of 2 U.S.C. 437g.

Office Use Only							
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FEC FORM 3
(Revised 02/2003)